

DOCUMENT RESUME

ED 250 108

PS 014 707

AUTHOR Millham, Spencer
 TITLE Evaluating Residential Institutions.
 PUB DATE 84
 NOTE 16p.; Paper presented at the Fatherhood Forum (Chicago, IL, June 16, 1984).
 PUB TYPE Viewpoints (120) -- Speeches/Conference Papers (150)
 EDRS PRICE MF01/PC01 Plus Postage.
 DESCRIPTORS Boarding Schools; *Children; Correctional Institutions; Elementary Secondary Education; *Evaluation Criteria; *Evaluation Methods; Evaluation Utilization; Foreign Countries; Input Output Analysis; Research Methodology; *Residential Institutions
 IDENTIFIERS *England; Orphanages

ABSTRACT

Drawing on the research experience of the Dartington Social Research Unit, this paper discusses methods and perspectives used in evaluating English residential institutions for children. Work of the Dartington Social Research Unit has involved evaluating aspects of a wide range of institutions, from elite boarding schools to children's homes and schools for young offenders. Some of the approaches used in this research include (1) the process model, an input-output approach that entails looking at residential institutions in terms of resource, treatment, and sheltering success; (2) conflict models, which contrast the perceptions of different groups and participants in the residential process; (3) adaptation models, which explore the ways in which staff and clients adapt to the goals of the residential establishment; (4) examination of the residential institution within the wider care system; (5) evaluation in terms of the continuity of residential care and its congruence with people's expectations; and (6) evaluation of residential care in historical terms. It is concluded that, while evaluation of residential establishments is a highly complex task, research should be an important aspect of developing residential practice and evaluation should be an integral part of planning and development. (CB)

 * Reproductions supplied by EDRS are the best that can be made *
 * from the original document. *

EVALUATING RESIDENTIAL INSTITUTIONS

Spencer Millham

ED250108
Let me begin with a confession: I quite like residential institutions. Indeed, I am probably the most institutionalised person at this conference having spent most of my life in draughty institutions which are now called 'group care', although I must admit that it never actually felt like that. I feel at home in these sorts of places and cannot sleep at night unless the darkness is punctuated by the distant flushing of lavatory cisterns. Indeed, what really fans me to lust is the sight of an approaching matron carrying a bunch of keys.

PS 014707
So, in your eyes, my life chances were severely limited from the start. Yet, contrary to much social work opinion, I have never found my institutionalisation to be a serious disadvantage, unless, of course, you want a lifetime of relationships which do not use surnames. Indeed, it has always struck me as curious that for the privileged in our society, the effects of institutionalisation are labelled differently than for the disadvantaged. For example, 'loyalty' for the privileged becomes 'dependence' for the disadvantaged, objectivity and coolness for the former are defined as emotional withdrawal for the latter, drive and initiative for one group become aggression for the other, and so on.¹

I would begin, therefore, by saying that I quite like residential institutions because for me, they have been status enhancing and they protect me from my most glaring inadequacies and make me feel safe. In stating this, I am following good research practice in laying out my prejudices before I discuss the topic in question. Even so, we perhaps forget that it is the unconscious beliefs and preoccupations which can cloud the objectivity of research rather than the values we openly espouse.²

U.S. DEPARTMENT OF EDUCATION
NATIONAL INSTITUTE OF EDUCATION
EDUCATIONAL RESOURCES INFORMATION
CENTER (ERIC)

X This document has been reproduced as
received from the person or organization
originating it.

☐ Minor changes have been made to improve
reproduction quality.

* Points of view or opinions stated in this docu-
ment do not necessarily represent official NIE
position or policy.

"PERMISSION TO REPRODUCE THIS
MATERIAL HAS BEEN GRANTED BY

Spencer
Millham

2
TO THE EDUCATIONAL RESOURCES
INFORMATION CENTER (ERIC)."

Evaluating a residential institution

The Dartington Social Research Unit has undertaken several evaluative studies of residential care. In 1964, we undertook research into boarding education, looking at a hundred institutions which educated many thousands of children. This work involved several hundred staff and parents.³ At that time, boarding education was an important political issue and for the Public Schools, a government commission was appointed. Since then, we have studied schools for young offenders, new residential approaches, maximum security in child care, the training of staff for residential social work, issues of control in residential child-care settings, children's homes and, very recently, the problems of maintaining links between parents and children absent in local authority care, many of whom are in residence.⁴

It is important to emphasise that this research programme has been partial in that we have not looked at residential provision for physically and mentally handicapped children or at special boarding schools or hospitals. In addition, it should be noted that we have not undertaken any research into residential care for the elderly. So, it is about children that I will talk and from which my illustrations will be drawn, although the evaluative criteria I offer may also apply to these other groups.

Historical studies of social services show that it was the English, as opposed to the Scots, Welsh or Protestant Irish, who employed institutional solutions to pressing social problems.⁵ Aspirant middle class families in England placed their sons in monastic schools as early as the 15th century and poor children and their families, through the operation of the Poor Law, found themselves increasingly in residence from the 16th century. This reminds us of that bifurcation of residential provision between the prosperous and the poor which is still found today. Indeed, the hostility of many social workers to residential provision

springs from the punitive separation and less eligibility practices inherited from past welfare provision. In the 18th and 19th centuries, residential institutions highlighted those parents who had failed to care for their children in a society which prized both family responsibility and the work ethic, beliefs which are still strong today, and, naturally, social workers have not been immune from these wider social attitudes. Indeed, it is arguable that professional attitudes partly take on the colour of their clients and, as a result, one does not find residence stigmatised and given low status in other sectors such as private education or private health care.⁶ England shares with certain other countries, such as Israel and Russia, the characteristic that a significant proportion of children experience residence, although the status in which the residential experience is held fluctuates, and it is estimated that in the United Kingdom each day, nearly a quarter of a million children get up and feel their way down to an institutional breakfast of cornflakes and fish fingers.⁷ Boys outnumber girls by three to one and, in spite of changes over the decade, the majority of establishments are still single sex. In addition to these children and young people, there are some 150,000 old people in residential homes and other groups resident in hostels, hospitals and sheltered accommodation.

We use residence in a wide variety of ways - to fashion elites for the administrative, professional and armed services and to assist or conceal from visibility social casualties who include some children of the poor as well as the physically and mentally handicapped and the elderly who lack family support. Thus, residential care raises sensitive issues well beyond the numbers of children involved.

This variety of residential provision poses a great problem for evaluation because research approaches for one set of clients cannot easily be replicated for others and, in talking about evaluation, we can only speak in general terms. Indeed, I am

often asked to define the essence of residential care and, after due consideration of profound issues, such as the nature of group living or the impact of totality, I usually reach the rather mundane conclusion that the only feature that characterises residential settings is the 'bed' which is provided not by the family but by others. It is also a distinguishing feature of residential social work that we spend time ensuring, with varying degrees of success, that this bed is occupied at night, preferably alone.

Given this wide variety of institutions, each with different functions and serving varied client groups, how can they be evaluated? I will suggest some of the approaches which we have used in our research and the measures and perspectives we have applied. First, I would like to discuss the process model.

Process model

This perspective involves an input-output approach, looking at residential institutions in terms of resource, treatment and sheltering success. Many studies using this approach have looked at the recidivism of people leaving penal establishments or the subsequent life styles of residents of children's homes and hospitals.⁸ Establishments can be evaluated using measures such as drop-out rates, educational success and failure and the subsequent careers of inmates. Clients are frequently followed-up over time and it is possible to make comparisons between different forms of intervention, such as the relative merits of community care for young offenders as opposed to residential interventions or the impact of volunteer efforts with the handicapped. Also, comparisons have been made with policies of minimum or zero interference.

This process model of research and evaluation is very popular with public bodies such as local authorities and central government. It accords with the customer-contractor relationship

laid down by the Rothschild Report which has influenced much of the research administration adopted by public bodies.⁹ The government or local authority is the customer and they agree with the researcher the priorities and design of the project. The task of the research worker is to produce significant findings and to bow out, leaving the administrators to assimilate and act on the information. In such evaluations, time scales have to be adhered to and seminal musings on social issues are usually avoided. In recent years, the research product itself has been subject to a 'value for money' perspective. Such research commissions do not encourage the author to spend 200 pages on 'how it feels to be old' simply because that is not what the customer requires. A sine qua non of this type of research is clear, accurate and unambiguous documentation at all levels. Indeed, in evaluating residential institutions, this often presents the first stumbling block for data availability, collection, presentation and comparability are haphazard, to say the least.

In the interpretation of empirical findings, it is often left for the facts to speak for themselves. The high recidivism rates of young offenders, for example, have in the past and still do evaluate reformatory interventions simply because criminality is the reason why public agencies intervened in this way. Similarly, one does not need to ask for the reasons behind the educational disadvantage of children in care other than to observe the frequent transfer between placements and high levels of breakdowns in care situations. In the same way, in our approved school research, links between the residential establishments and the children's families and outside social workers needed no further explanation than statistics about the high proportion of clients who did not see their relatives or who could not name their after-care officer. Some facts, therefore, do speak for themselves but, usually, further information is required beyond simple data collection.

Conflict Models

In spite of its popularity, this process model is far from satisfactory, particularly in studies of residential care. Residential institutions deal with people who cannot be viewed simply as products on a conveyor belt. Hence, the evaluator has to abandon the use of documents and measures and consider how people perceive outcomes and differences. Behaviour within residential institutions can be differently interpreted. For instance, acting out and recalcitrant behaviour in a therapeutic environment produces quite a different reaction from staff than in a penal institution. In addition, the ends of a residential establishments are not universally accepted either by staff or residents and the means of achieving these goals are subject to all sorts of adaptations and accommodations.

Another approach to evaluation, therefore, is to contrast the perceptions of different groups and participants in the residential process - families, residents, senior and junior staff and administrators.¹⁰ It is possible to highlight gaps which suggest stresses and strains within the organisation that can influence its effectiveness. For example, principals will often talk about involving the family while care staff may class parents as 'nuisances created by the motor car'. There will be similar gaps between the stated goals of the organisation and what actually happens and these can be explored by charting over time what people actually do rather than what they claim. Even then, some institutional aims are still difficult to evaluate in this way. For example, I can remember a headmaster of a great Catholic school telling me that his real priorities were 'preparing my boys for death' - hardly a perspective ardently shared by his pupils. Needless to say, his effectiveness was also somewhat resistant to evaluation. Many residential establishments are highly expressive, promoting the quality of life or enabling personal growth and development. Here, it is difficult to measure the beliefs and ideologies that are so important.

It is important to note that highlighting gaps between people's perspectives does not always imply disfunction and strain. Institutional goals will change over time and the balance between different kinds of goals - instrumental, expressive and administrative - will shift. In times of instability and shrinking finance, instrumental and administrative goals, such as balancing the books or maintaining numbers, will achieve eminence. Tensions can also keep residential establishments alive. Indeed, when I looked after children, I found that it was not the clients who presented the greatest problems to staff but other colleagues and the endless constraints and economies foisted from above.

In research, it is not easy to match an evaluation which stresses congruence between ends, roles and control methods, and one which highlights conflict, differing perceptions and gaps between aims and realisation. One of the problems of evaluating residential institutions is that compromise between such approaches is very difficult.

Adaptation Models

If the process model raises many problems for evaluation, it is possible to look at residential institutions in other ways. Because residential establishments seek a range of goals, it is possible to explore the ways in which staff and clients adapt to these expectations. This approach would emphasise such features as classroom conduct or leadership style and the extent of aggressive behaviour, educational achievement or running away. Indeed, the ways in which the informal world of residential institutions relates to the explicit formal organisation and responds to its demands have long attracted researchers.¹¹

In our research into residential child care, we have frequently explored the orientation of the informal world of staff and children but, even here, have encountered difficulties

because establishments can view aspects of the informal world quite differently. It is frequently assumed by investigators, for example, that similar behaviour means the same thing across different institutions. This is clear, for instance, in the sexual adaptations of adolescents which would at first appear constant, after all there is a limit to what can be accomplished. Yet heterosexual and even homosexual behaviour within residential care have a wide variety of complex functions for the participants. It might not be merely a response to 'the pains of imprisonment', to borrow Goffman's words, but can also provide pastoral care or non-judgemental acceptance from others and may even be part of a status achievement. One of the problems of looking at client and staff adaptations, therefore, is that adaptations to the residential environment mean different things across institutions.

Functions for the wider care system

A less myopic perspective on evaluation and one which avoids the institutional trap of preoccupation with closed societies, is to evaluate residential care by looking at its contribution to wider contexts. How, for example, does residential care contribute to the wider system of which it is a part? For example, while locking up children in closed units has been shown by using input and output measures to be ineffective in modifying their difficult behaviour, security does help other establishments to function by providing them with fail-safe mechanisms.¹² Similarly, residential care can contribute to other systems. For example, establishments such as Youth Treatment Centres may, by keeping very difficult children in the care system, take the strain from adolescent units elsewhere, such as in mental health or special hospitals. In the same way, youth custody and detention centres may enable community approaches to flourish. In assessing these contributions, we would look at the alternative choices that people have for children and indicate the important contributions served by those

institutions which care for residual groups. In doing this, however, it is important to consider whether the functions could be better served by alternative, perhaps non-residential, methods. Unfortunately, this type of research and evaluation is uncommon, often because it crosses Departmental responsibilities and is difficult to mount unless there is sufficient reliable and consistent information allowing comparability between systems.

Important in this context is the symbolic nature of much residential provision. It often stands for something - for compassion, for care of the luckless, for retribution or asylum for those seeking peace. As we walk along the High Street, it is often reassuring to look at the intricate iron gates of institutions, admiring the tulips or furtively glancing for an inmate, to feel that all is right with the world. Because institutions are administratively neat and are prized by an administrative elite educated in boarding schools, they often appear the right way of tackling social problems. Indeed, it is sometimes possible to gauge institutional values at a glance. In colleges and schools, the huge mediaeval chapels beckon you heavenwards while the inadequate sanitation often sped your departure. The vast parade grounds of the old reformatory and industrial schools or service academies struck you with their priorities as you looked in vain for a harpischord room or school of dance. The packed art and craft rooms of progressive schools might contrast with the empty and doorless gymnasium nearby. Indeed, the best example of institutional bravado known to me is the military academy of Woolwich which, although some half a mile long, with assorted cannons and massive parade ground, is barely 20 yards wide.

Congruence

Finally, it is possible to evaluate residential establishments on other dimensions such as their continuity and congruence with people's expectations. This is very rarely done

although we have tried to do this in some of our past research where we have looked at the extent to which the residential institution provides an integrated and consistent experience for the client.¹³ How does, for example, a residential episode fit in with what has gone before and what is to come? Consistency and outcome is most dazzlingly displayed in the English public school. The experience fits in with parents' and family expectations and the ethos which is hierarchical, competitive, right-wing, expressively claustrophobic, hardworking and based on 'service to others' is duplicated in everything the boys and girls will move on to. Trained for status rather than a specific skill, leavers will move effortlessly across and within complex organisations, such as the professions, government departments and armed services, where they will be content, confident, fair and uninvolved.

If residential child care is evaluated in this way, however, the experience seems to be highly problematic. For example, it is particularly incongruent and discontinuous for delinquents who, for the same offence, can find themselves in a range of settings, such as a therapeutic group or doing press-ups in an attendance centre or locked up as part of a short, sharp shock. Such an evaluation would emphasise the child care process, looking over time at children's care careers, the factors that influence them and the extent to which the experience is congruent and meaningful or incongruent and conflicting.

We have recently attempted this in a study of the problems of maintaining links between children in care and their families and have sought ways to make the child care experience more continuous with prior and subsequent events.¹⁴ Indeed, after many years of scrutinising disadvantaged children, particularly those who enter state care, one concludes that residential establishments are usually highly incongruent - conditional love ceases at 18 and good quality care provision, in both residential

and foster care, is vitiated as adolescents suddenly face the structural constraints of joblessness, social isolation and inadequate and mean accommodation. In this, the recent comments in the report of the House of Commons Social Services Committee which stresses the problems of adolescents leaving care and advocates some remedies are to be welcomed.¹⁵

Historical continuity

In closing, I would emphasise that residential care can be evaluated not only longitudinally in terms of clients' careers and the consistency of the contribution but also over much longer periods of time. As I leave this conference, I shall set out on the train from Paddington station speeding along the old GWR line going West. This train is a kind of institutional special; all kinds of young people will be on it. As it passes along, domes, campaniles, country houses and reconditioned fortresses will be glimpsed through the trees, all housing certain kinds of young people. Residential establishments for the young flourished in the 19th century as the railways radiated from the satanic mills of cities into the sweet and healthy countryside. Faced with a rapidly expanding youth population, the Victorians applied the factory system to social engineering, a solution which was fuelled by the many religious controversies that prevailed and where to have been reared in the wrong brand of faith would involve one subsequently in an eternity of explanation. The legacy of this remedy can still be seen. From my train, boys and girls, solemn delinquents, weepy prep school children, armed services' recruits and holy novices will all get off to be met by blue-smocked matrons, bemedalled sergeants, harassed house parents and officious senior boys for a whiff of mock-Gothic totality. Indeed, the perpetual feast of the English class system is revealed in all of this, aristocrats getting off at Reading for Eton and Windsor, grey-suited middle-class boys sitting it stiffly out to Taunton, recruits boozing their ways to

Exeter and Plymouth while the progressives, barefooted and twanging guitars, trek on to the lunatic Celtic fringe.

English residential institutions are very old. They need to be approached carefully. One of the schools in our original boarding schools study boasted a Roman emperor among its ex-pupils. Very often these establishments see themselves as repositories of wisdom, experience and compassion in the care of the young. Many believe that they have a mission to keep this intact. This is equally true of parts of the child care system. Hence, residential care can also be evaluated on this dimension, on its ability to change and accommodate without sacrificing its essential values and comprising its expressive ends.

Conclusions

I have suggested that residential institutions can be evaluated in different ways. Initially, I described the process model which uses input and output measures, I moved on to consider approaches which explore the perceptions of those who participate in the residential experience, an approach which highlights gaps in perspectives and encourages us to explore discreet aspects of behaviour and adaptation, such as aggression, absconding or educational achievement. I explained that it is also possible to evaluate residential establishments by looking at their wider functions for the systems of which they are a part or for other systems providing for young people, although I emphasised that this does not necessarily justify institutional remedies. In addition, one should be aware that residential institutions have symbolic functions and that evaluation should always entertain a time dimension, both in the extent to which residential experience is congruent with other aspects of the child's career and over much longer periods of time during which the residential setting can be seen to enshrine and protect values and aspirations concerning children.

A good research evaluation should keep all of these dimensions in mind, even if it is impossible to explore them all. Neither are these dimensions equally susceptible to measurement and quantification. The evaluator also needs to be humble in reporting because to evaluate successfully on one dimension is likely to scant consideration of others. This is why to argue the merits and disadvantages of residential care as opposed to, say, fostering is unproductive. As several speakers at this conference have indicated, there is a close relationship with the two, and the question which should confront us is whether the existing association is the appropriate relationship rather than advocating the merits and disadvantages of each approach when considered in isolation.

The problem facing research workers is that the evaluation of residential establishments is a highly complex task and the reports that we write not only have to entertain these wide and varying perspectives but also meet the expectations of widely different audiences. Administrators, politicians, social workers, teachers and, above all, academic colleagues, all have partial perspectives and idiosyncratic interests. Hence, we tend to seek safety in the 'megabore' scientific report which, by its very size and comprehensiveness, suffocates criticism, except, of course, the most cogent reproach that it fails even to be read by those who daily tend children.¹⁶

Nevertheless, research should be an important aspect of developing residential practice and evaluation should be an integral part of planning and development. The recent report of the House of Commons Social Services Committee pointed out that some of the most useful evidence they had received was from academic sources. However, evaluations are little use unless they are properly used and disseminated into practice and social work training.¹⁷

These last issues go a good deal deeper than expecting research workers, the DHSS or Economic and Social Research Council to make extra efforts at getting material across. There are, I suspect, no other professions in the United Kingdom where a Government report could write, as is found in the recent report of the House of Commons Social Services Committee, that 'there seems to be no effective ways for the results of research to be incorporated into training material; in any event training courses are often not geared either to research itself or to its absorption...social work does not have the long tradition of research found in other disciplines.' If this is the case, then it is high time it was rectified. In reading this recent report, I was reminded of a moment of truth when a social worker enquiring as to my occupation replied, "Research, how very interesting but, surely, so sterile". While I accept that such comments may reflect the quality of much social research that is undertaken, the social work profession might offer more fertile patches for tender seedlings.

FOOTNOTES

1. M.Spinley, The Deprived and Privileged, London : Routledge and Kegan Paul, 1953.
2. H.Becker, 'Whose side are we on?', Social Problems, XIV, pp.239-248, 1967.
3. R.Lambert, S.Millham and R.Bullock, The Chance of a Lifetime ?, London : Weidenfeld & Nicolson, 1975.
4. S.Millham, R.Bullock and P.Cherrett, After Grace-Teeth, London : Human Context Books, 1975; S.Millham, R.Bullock and K.Hosie, Locking Up Children, Farnborough, Saxon House, 1978; S.Millham, R.Bullock and K.Hosie, Learning to Care, Farnborough : Gower, 1980; S.Millham, R.Bullock, K.Hosie and M.Haak, Issues of Control in Residential Child Care, London : HMSO, 1981; D.Berridge, Home and Away and S.Millham, R.Bullock, K.Hosie and M.Haak, The Problems of Maintaining Links between the Children in Care and their Families, Dartington Social Research Unit, 1984.
5. I.Pinchbeck and M.Hewitt, Children in English Society, London : Routledge and Kegan Paul, 1969.
6. A.Davis, The Residential Solution, London : Tavistock, 1981.

7. P.Moos, 'Residential care of children' in J.Tizard, L.Sinclair and R.Clark (eds.), Varieties of Residential Experience, London : Routledge and Kegan Paul, 1975, pp. 17-51; F.Loughran, Paper to Dartington Social Research Unit/University of Bristol Research Seminar, 1983.
8. A.Bottoms and F.McClintock, Criminals Coming of Age, London : Heinemann, 1973; S.Millham et al., After Grace-Teeth, Op. Cit; D.Cornish and R.Clark, Residential Treatment and its Effects on Delinquency, London : HMSO, 1975; M.Rutter, D.Quinton and C.Liddle, 'Parenting in two generations : looking backwards and looking forwards' in N.Madge (ed.), Families at Risk, London : Heinemann, 1983, pp. 60-98; D.Hall and M.Stacey (eds.), Beyond Separation, London : Routledge and Kegan Paul, 1979.
9. HMSO, A Framework for Government Research and Development, 1972
10. R.Lambert and S.Millham, The Hothouse Society, London : Weidenfeld & Nicolson, 1968; R.Lambert, S.Millham and R.Bullock, A Manual to the Sociology of the School, London : Weidenfeld & Nicolson, 1970; S.Millham, R.Bullock and P.Cherry, 'A conceptual scheme for the comparative analysis of residential institutions' in J.Tizard et al., Varieties of Residential Experience, Op. Cit., pp. 203-222.
11. H.Polsky, Cottage Six, New York : Russell Sage, 1962; J.Coleman, The Adolescent Society, Chicago : Free Press, 1961; T. and P. Morris, Pentonville, London : Routledge and Kegan Paul, 1963; D.Hargreaves, S.Hester and F.Mellor, Deviance in Classrooms, London : Routledge and Kegan Paul, 1976; P.Woods, Sociology and the School, London : Routledge and Kegan Paul, 1983; P.Willis, Learning to Labour, Farnborough : Saxon House, 1977.
12. S.Millham et al., Locking Up Children, Op. Cit.
13. R.Lambert et al., The Chance of a Lifetime, Op. Cit; S.Millham et al., After Grace-Teeth, Locking Up Children, Op. Cit.
14. Dartington Social Research Unit, The Problems of Maintaining Links Between Children in Care and Their Families, Research Report, 1984.
15. HMSO, Second Report of the House of Commons Social Services Committee, Children in Care, 1984.
16. Dartington Social Research Unit/University of Bristol, The Dissemination of Research Findings in Social Work, 1983.
17. HMSO, Second Report of the House of Commons Social Services Committee, Op.Cit.